

State Water Resources Control Board

Division of Water Rights

1001 I Street, 14th Floor ◆ Sacramento, California 95814 ◆ 916.341.5300 P.O. Box 2000 ◆ Sacramento, California ◆ 95812-2000 FAX: 916.341.5400 ◆ www.waterrights.ca.gov



WATER RIGHT COMPLAINT

For information in filling out this form, see pamphlet titled "Investigating Water Right Complaints"

CID# _	
File:	
(For	staff use only)

omplainant				
(Name)				(Phone No.)
(Address)				(Zip Code)
arty complained against (Respo	ondent)			
1 ty complained against (1 tespe	ondent)			
(Name)		(Phone No.)		
(Address)				(Zip Code)
ocation of Respondent's Divers	zion			
•				
he diversion is located on:	(Name of Spring, Stream, or Body of Water)			
At a point within14 of				
County of	Assessor's F	arcel No		
The general location is as follows: _				
	(Name of Road, Distance to Nearest Town, Etc.)			
escription of Complaint				
The following situation or condition	is occurring (attach additi reports, etc.		bhotographs, r	naps, sketches
-				

ossible Resolution of Complaint	
offer the following possible solution to the sit	uation (attach additional sheets if necessary):
Complainant's Diversion and Water Righ	nts (Fill in if Injury Claimed)
My diversion is located on:	
	(Name of Spring, Stream, or Body of Water)
At a point within1/4 of1/4 of	Section T R, B&M
County of	Assessor's Parcel No
use water for (what and where):	
The basis of my claim to divert water is:	
An appropriative right under License No.	, Permit No, Application No
	Statement of Water Diversion and Use No
. , , _	
copy of this complaint has been sent to the Re	espondent by:
•	☐ Certified Mail ☐ Regular Mail ☐ Personal Deliver
	-
declare under penalty of perjury that the above	e is true and correct to the best of my knowledge and belief.
Signature	 Date

NOTE: Send original Complaint to the Division of Water Rights and a copy to the Respondent. Forms for submitting an Answer to Complaint will be sent to the Respondent by the Division of Water Rights.